

INSTRUCTIONS TO THE PARENT/GUARDIAN

Parent/Guardian to complete Childcare Request Form Part 1 and return to the Financial Support Team.

Childcare Provider Details Part 2 a & b to be completed by the Childcare Provider and returned via email to

welfare@educationpartnershipne.ac.uk

If you are applying for Advanced Learner Loan to fund your course, we cannot pay for any Childcare costs until this loan has been approved.

Once all forms are returned and processed a confirmation email will then be sent to the parent/guardian and childcare provider.

Please note:

Childcare providers must be registered with OFSTED.

It is the responsibility of the parent/guardian to agree the terms of a contract with a provider.

The College will pay up to £4.50 per hour childcare for **college timetabled hours only minus government funded hours.**

Payment will be made direct to the Childcare provider via monthly BACS transfer. However, the College does need certain information from the Childcare provider.

The College cannot make any payment until the Childcare Request Form Part 1 and Childcare Provider Details Part 2 a & b forms has been returned to the Financial Support Team.

It is your responsibility to inform the College and your Childcare Provider if you withdraw from your course. The College cannot cover any cancellation charges should you withdraw from your provision. The only time we would cover such charges is if the College has cancelled your course. In all other cases you are liable for such fees.

If you have any queries regarding the issues raised in this document please do not hesitate to contact the Financial Support Team at welfare@educationpartnershipne.ac.uk

CHILDCARE REQUEST FORM – PART 1

For Office Use Only:

Student Enrolment No - _____

20+ Learner Support Fund – Advanced Learner Loan Bursary –

Benefit Type - UC/ IS / JSA / ESA / Household Income < £28,000 Evidence provided _____

To be completed by Parent/Guardian:

COURSE DETAILS

Course Title - _____

Start Date: _____ End Date _____

No. of Weeks: _____

Parents Name _____

D.O.B. _____ Age _____

Address _____

Postcode _____

Email address _____

Contact Telephone Number _____

Childs Name	Childs D.O.B	Start Date	Hours attended per week
1.			
2.			

I agree to inform the Financial Support Team immediately of any change of circumstances.

Parent/Guardian signature: _____



sunderlandcollege.ac.uk

Sunderland College
Bede Campus, Durham Road,
Sunderland, SR3 4AH

Hartlepool Sixth Form
Blakelock Road, Hartlepool,
TS25 5PF

Northumberland College
College Road, Ashington
NE63 9RG



Education
Partnership
NorthEast

INSTRUCTIONS TO THE CHILDCARE PROVIDER

Childcare providers must be registered with OFSTED.

It is the responsibility of the parent/guardian to agree the terms of a contract with the Childcare provider.

The College will pay up to £4.50 per hour childcare for **college timetabled hours only minus government funded hours.**

Payment will be made direct to the Childcare provider monthly via monthly BACS transfer. However, the College does need certain information from the Childcare provider. Attached is the Childcare Provider Details Part 2 a & b that needs to be returned to the college by the childcare provider.

Once all forms are returned and processed a confirmation email will then be sent to the parent/guardian and childcare provider.

Please note:

The College cannot make any payment until the Childcare Request Form Part 1 (which is the responsibility of the parent/guardian to complete) and Childcare Provider Details Part 2 a & b forms are returned to the Financial Support Team.

It is the responsibility of the student to inform the Childcare Provider should they withdraw from their course. The College cannot cover any cancellation charges should a student withdraw from your provision. The only time we would cover such charges is if the College has cancelled the student's course. In all other cases the student is liable for such fees.

If you have any queries regarding the issues raised in this document please do not hesitate to contact the Financial Support team at welfare@educationpartnershipne.ac.uk

To be completed by the Childcare provider and returned to:
welfare@educationpartnershipne.ac.uk

CHILDCARE PROVIDER DETAILS FORM – PART 2 (a)

A. CHILDCARE PROVIDER DETAILS

Childcare Provider's Name _____

Address _____

Postcode _____ Telephone Number _____

Email Address _____

Ofsted Registration Number/URN Number _____

I charge £ _____ per hour

B. PARENT/CHILD'S DETAILS

Parents Name _____

D.O.B. _____ Age _____

Address _____

Postcode _____

Childs Name	Childs D.O.B	Start Date	Hours attended per week
1.			
2.			

NOTE: STUDENT, CHILDCARE PROVIDER AND THE COLLEGE WILL NEED TO SHARE INFORMATION ABOUT EACH OTHER.



CHILDCARE PROVIDER DETAILS FORM – PART 2 (b)

C. BANK INFORMATION

You will be paid Monthly by BACS Transfer, please insert your bank details below:

Bank _____ Branch _____

Address _____

Postcode _____

Email Address _____

Name of Account Holder _____

Sort Code _____ Account Number _____

D. CHILDMINDER/CHILDCARE PROVIDERS DECLARATION

I agree to inform the Financial Support Team immediately of any change of circumstances.

Childcare provider's signature: _____

Childcare provider's stamp: _____

Date: _____

NOTE: STUDENT, CHILDCARE PROVIDER AND THE COLLEGE WILL NEED TO SHARE INFORMATION ABOUT EACH OTHER.

